(	Change in Company's premium or rate	e level produced by rate revision effective	October 19, 2009
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage Private Passenger		
2	Commercial		
3.	Liability Other Than Auto		
4. 5.	Burglary and Theft Glass		
5. 6.	Fidelity		
0. 7.	Surety		
8.	Boiler and Machinery		
9.	Fire	124,049	-0.4%
10.	Extended Coverage	83,164	-0.4%
11.	Inland Marine	85,104	0.470
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		-
15.	Other Total of All Other	215,751	0
	Comml Pr Cov &	213,731	·
	Pgms		
	Line of Insurance		
	Line of insurance		
Does f	iling only apply to certain territory (te	erritories) or certain classes? If so, specify:	
N/A		,	
			*
Brief o	description of filing. (If filing follows	rates of an advisory organization, specify	organization):
		Loss Cost Revision - CF-2009-RLA	

American Auto Ins Co Name of Company

<sup>\*</sup> Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will result from application of new rates.

(	Change in	Company's premium or rate	e level produced by rate revision effective	October 19, 2009
		(1)	(2) Annual Premium	(3) Percent
		Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.		obile Liability e Passenger		
		nercial		
2.	Privat	obile Physical Damage e Passenger nercial		
3.		by Other Than Auto		
4.		ry and Theft		
5.	Glass	,		
6.	Fidelity	<b>y</b>		
7.	Surety			
8.	Boiler	and Machinery		
9.	Fire		292,643	-1.1%
10.	Extend	ed Coverage	154,303	-1.1%
11.	Inland	Marine		
12.	Homeo			
13.		ercial Multi-Peril		
14.	Crop F			
15.	Other	Total of All Other Comml Pr Cov &	1,959,874	0
		Pgms Line of Insurance		
		Line of insurance		
Does f	iling only	apply to certain territory (to	erritories) or certain classes? If so, specify:	
N/A		117	,	
Brief o	descriptio	n of filing. (If filing follow	s rates of an advisory organization, specify	organization):
Con	nmercia	l Property - Adopt ISO	Loss Cost Revision - CF-2009-RLA	.1

The American Ins Co Name of Company

<sup>\*</sup> Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will result from application of new rates.

(	Change in Company's premium or rate (1)	e level produced by rate revision effective (2) Annual Premium	October 19, 2009 (3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
3. 4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	76,377	-2.5%
10.	Extended Coverage	46,783	-2.5%
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Total of All Other	155,853	0
	. Comml Pr Cov &		
	Pgms		
	Line of Insurance		
	<del></del>		
Does f	iling only apply to certain territory (to	erritories) or certain classes? If so, specify:	
N/A			
Brief o	description of filing. (If filing follows	s rates of an advisory organization, specify	organization):
Con	nmercial Property - Adopt ISO	Loss Cost Revision - CF-2009-RLA	.1

Associated Indemnity Corp Name of Company

<sup>\*</sup> Adjusted to reflect all prior rate changes.

\* Change in Company's premium level which will result from application of new rates.

	revision effective 1/1/10	mium or rate level produced I	oy rate
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois) *	<u>Change (+ or -) **</u>
1.	Automobile Liability Private Passenger		
2.	Commercial Automobile Physical Damage Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	1,198,427	+1.1%
0.	Extended Coverage	1,198,427	+1.1%
1.	Inland Marine		
2.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
	es filing only apply to certain territory (		
R	of description of filing. (If filing follows levising Type of Business Factors and P-F-104.		
* /	Adjusted to reflect all prior rate cha Change in Company's premium level w vill result from application of new rates	/hich	
			me of Company d Mutual Insurance Compa
			Official -

Change in Compa	any's premium	or rate	level	produced	by	rate
revision effective	4/1/10	,		· ·		
(1)		) Januar A	2) Prom	ium		

	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois) *	<u>Change (+ or -) **</u>
1.	Automobile Liability Private Passenger		
2.	Commercial Automobile Physical Damage Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	1,246,934	-0.1%
10.	Extended Coverage	1,246,934	-0.1%
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
Doe	Line of Insurance es filing only apply to certain territory (	territories) or certain classes? If	so, specify:
_N	0.		
<u>A</u>	ef description of filing. (If filing follows dopting ISO Loss Costs from Circular Adjusted to reflect all prior rate change in Company's premium level v	#CF-2009-RLA1.	n, specify organization):
٧	vill result from application of new rates	S.	
		Nar Nar	me of Company
		Federate	d Mutual Insurance Company
		(	Official – Title

Howard Hammel

	Change in Company's pre revision effective 1/1/10	mium or rate level produced I	by rate
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois) *	Change (+ or -) **
1.	Automobile Liability Private Passenger		
2.	Commercial Automobile Physical Damage Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	200,728	<u>+1.1%</u>
10.	Extended Coverage	200,728	+1.1%
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
<u>Y</u>	es filing only apply to certain territory ( es, see Summary Page 1 for breakdo ef description of filing. (If filing follows	wn of changes by Type of Busin	ess.
	evising Type of Business Factors and P-F-104	rules for Business Income-Prer	nier Select Changes
** (	Adjusted to reflect all prior rate change in Company's premium level will result from application of new rates	vhich	
		Federated	me of Company d Service Insurance Company Official – Title
			rd Hammel
		Dave	a Jammer

	(1)	(2) Annual Premium <u>Volume (Illinois) *</u>	(3) Percent Change (+ or -) **
	<u>Coverage</u>	volume (Illinois)	Change (+ or -)
1.	Automobile Liability Private Passenger	-1	
2.	Commercial Automobile Physical Damage Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		<u></u>
9.	Fire	196,208	-1.0%
). ).	Extended Coverage	196,208	-1.0%
1.	Inland Marine	100,200	
2.	Homeowners		
ے. 3.	Commercial Multi-Peril		
	Crop Hail		
4	CIOD I Idii		
	·		
	Other Line of Insurance	-14-2-1	
5. Doe	Other	territories) or certain classes? If	so, specify:
N	Other Line of Insurance es filing only apply to certain territory (	rates of an advisory organizatior	
Srie A	Other  Line of Insurance  es filing only apply to certain territory (1)  o.  ef description of filing. (If filing follows dopting ISO Loss Costs from Circular Adjusted to reflect all prior rate cha	rates of an advisory organization #CF-2009-RLA1.	
5. Notes	Other  Line of Insurance es filing only apply to certain territory (for constant territory)  def description of filing. (If filing follows)  dopting ISO Loss Costs from Circular	rates of an advisory organization #CF-2009-RLA1. inges.	
Srie A	Change in Company's premium level w	rates of an advisory organization #CF-2009-RLA1. inges. rhich	n, specify organization):
Srie	Change in Company's premium level w	rates of an advisory organization #CF-2009-RLA1.  Inges. /hich .  Nan Federated	n, specify organization):

(	Change in Company's premium or rate	e level produced by rate revision effective	October 19, 2009
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery	212.150	0.50/
9.	Fire	212,173	-0.5%
10.	Extended Coverage	175,211	-0.5%
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Total of All Other	3,432,347	0
	Comml Pr Cov &		
	Pgms		
	Line of Insurance		
	Line of mourance		
Does f	iling only apply to certain territory (t	erritories) or certain classes? If so, specify:	:
N/A		,	
Drief.	description of filing (If filing follow	s rates of an advisory organization, specify	organization):
Com	omercial Property - Adopt ISO	Loss Cost Revision - CF-2009-RLA	N.
_Con	illiercial Froperty - Adopt 150	LUSS COST REVISION - CT 2007-REF	

Fireman's Fund Insurance Co Name of Company

<sup>\*</sup> Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will result from application of new rates.

(	Change in Company's premium or rate	e level produced by rate revision effective	October 19, 2009
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
3. 4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	331,270	-0.7%
10.	Extended Coverage	155,543	-0.7%
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Total of All Other	3.750,883	0
	Comml Pr Cov &		
	Pgms		
	Line of Insurance		
<b>n</b>	*11	iti)tiin alaasaa Ifaa amaaifa	
	<b>•</b> • • • • • • • • • • • • • • • • • •	erritories) or certain classes? If so, specify:	
N/A			
Drief	locarintian of filing (If filing follows	rates of an advisory organization, specify	organization):
		Loss Cost Revision - CF-2009-RLA	
Con	microiai i Topcity - Adopt 130	LOSS COST REVISION - CT-2007-REA	

National Surety Corp Name of Company

<sup>\*</sup> Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will result from application of new rates.